

Attorney Docket No.

Patent 040070<u>-666</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

MS NON-FEE AMENDMENT

In re Patent Application of

Leif Mangus Andre Nilsson et al.

Application No.: 09/580,119

Filing Date:

May 30, 2000

Group Art Unit: 2634

Examiner: CURTIS B. ODOM

Confirmation No.: 1475

Title: IMPROVED FRACTIONAL N PHASE LOCKED LOOP

AMENDMENT/REPLY TRANSMITTAL LETTER

RECEIVED

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

SEP 0 9 2004

Technology Center 2600 Sir: Enclosed is a reply for the above-identified patent application. A Petition for Extension of Time is also enclosed. Terminal Disclaimer(s) and the \$\infty\$ \$55.00 (2814) \$\infty\$ \$110.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed. Also enclosed is/are Small entity status is hereby claimed. Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the □ \$385.00 (2801) □ \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e). Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above. Applicant(s) previously submitted ____ for which continued examination is requested. Applicant(s) requests suspension of action by the Office until at least which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed. A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.

| Attorney Docket No. | 040070-666 | |
|---------------------|--------------|--|
| Application No | . 09/580.119 | |

| X | No additional claim fee is required. |
|---|--|
| | An additional claim fee is required, and is calculated as shown below. |

| AMENDED CLAIMS | | | | | |
|---|------------------|--|---------------|--------------------|----------------|
| | No. of Claims | Highest No. of Claims Previously Paid For | Extra Claims | Rate | Additional Fee |
| Total Claims | 38 | MINUS 38 = | 0 | x \$18.00 (1202) = | \$ 0.00 |
| Independent Claims | 6 | MINUS 6 = | 0 | x \$86.00 (1201) = | \$ 0.00 |
| If Amendment adds n | nultiple depen | dent claims, add \$ | 290.00 (1203) | | |
| Total Claim Amendment Fee | | | \$ 0.00 | | |
| Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee | | | \$ 0.00 | | |
| TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT | | | | \$ 0.00 | |

| Ш | A check in the amount of | of | is enclosed for the fee due. |
|---|--------------------------|-------------------|------------------------------|
| | Charge | to Deposit Accou | unt No. 02-4800. |
| | Charge | to credit card. F | Form PTO-2038 is attached. |

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Date: September 3, 2004

Ву

Registration No. 47,248